

A For the 2012 calendar year, or tax year beginning 10-01-2012 , 2012, and ending 09-30-2013

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization INTERNATIONAL REPUBLICAN INSTITUTE		D Employer identification number 52-1340267
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 1225 EYE STREET NW NO 700	Room/suite	E Telephone number (202) 408-9450
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		G Gross receipts \$ 63,382,485
	F Name and address of principal officer LORNE W CRANER 1225 EYE STREET NW NO 700 WASHINGTON, DC 20005		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW. IRI. ORG			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities ADVANCE FREEDOM AND DEMOCRACY WORLDWIDE DEVELOPING POLITICAL PARTIES, CIVIC INSTITUTIONS, OPEN ELECTIONS, DEMOCRATIC GOVERNANCE AND THE RULE OF LAW		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	241
	6 Total number of volunteers (estimate if necessary)	6	160
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 66,192,563	Current Year 63,381,050
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,114	1,244
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-68,520	-17,750
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	66,125,157	63,364,544
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,428,181
14 Benefits paid to or for members (Part IX, column (A), line 4)		0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		17,182,538	17,889,042
16a Professional fundraising fees (Part IX, column (A), line 11e)		31,500	1,500
b Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 1,500			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		45,786,795	42,490,212
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		66,429,014	64,019,557
19 Revenue less expenses Subtract line 18 from line 12		-303,857	-655,013
Net Assets or Fund Balances			Beginning of Current Year
	20 Total assets (Part X, line 16)	10,063,128	9,662,270
	21 Total liabilities (Part X, line 26)	7,525,918	7,527,750
	22 Net assets or fund balances Subtract line 21 from line 20	2,537,210	2,134,520

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer	
	JUDY VAN REST EXECUTIVE VICE PRESIDENT Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name YONG ZHANG CPA	Preparer's signature
	Firm's name ▶ MCGLADREY LLP	
	Firm's address ▶ 1861 INTERNATIONAL DRIVE SUITE 400 MCLEAN, VA 22102	

May the IRS discuss this return with the preparer shown above? (see instruction

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

1

Briefly describe the organization’s mission

IRI ADVANCES FREEDOM AND DEMOCRACY WORLDWIDE BY DEVELOPING POLITICAL PARTIES, CIVIC INSTITUTIONS, OPEN ELECTIONS, DEMOCRATIC GOVERNANCE AND THE RULE OF LAW

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 6,482,240 including grants of \$) (Revenue \$)

SOUTH SUDAN POLITICAL PARTIES AS INSTITUTIONS OF DEMOCRATIC GOVERNANCE (USAID DFD-A-00-08-00350-8045)THROUGH WORKSHOPS AND SEMINARS, IRI WORKED WITH SOUTH SUDAN’S POLITICAL PARTIES AS THEY STRENGTHENED THEIR ORGANIZATIONS TO BETTER REPRESENTTHEIR MEMBERS, WORKED WITH WOMAN AND YOUTH TO INCREASE THEIR PARTICIPATION IN THE POLITICAL PROCESS, WORKED WITH MEMBERS AND STAFF OF THE NATIONAL LEGISLATIVE ASSEMBLY TO STRENGTHEN THEIR CAPACITY TO REPRESENT THEIR CONSTITUENTS IRI ALSO CONDUCTED NONPARTISAN PUBLIC OPINION RESEARCH TO PROVIDE SOUTH SUDAN’S POLITICAL PARTIES, GOVERNMENT OFFICIALS AND CITIZENS WITH INDEPENDENT DATA ON ISSUES SUCH AS GOVERNMENT PRIORITIES, VOTING BEHAVIORS AND ATTITUDES TOWARD DEMOCRACY, ATTITUDES TOWARD WOMEN AND GENERAL DEMOGRAPHICS OF THE COUNTRY’S PEOPLE LEADING UP TO THE JANUARY 2011 REFERENDUM, IRI TRAINED POLITICAL PARTY AGENTS ON THEIR RIGHTS AND RESPONSIBILITIES AS OBSERVERS DURING THE REFERENDUM IRI HOSTED TRAININGS IN ALL 10 STATES AND 78 COUNTIES, TRAINING MORE THAN 9,000 OBSERVERS

4b

(Code) (Expenses \$ 3,598,094 including grants of \$) (Revenue \$)

INCREASED ELECTORAL PARTICIPATION IN AFGHANISTAN (USAID 306-A-00-08-00529-00 8180)THROUGH TOWN-HALL MEETINGS, CIVIC EDUCATION WORKSHOPS AND IRI’S AFGHAN LEADERSHIP ACADEMY, IRI WORKED WITH CIVIL SOCIETY GROUPS SO THEY WERE ABLE TO IMPLEMENT CAMPAIGNS FOR GREATER LOCAL AND NATIONAL GOVERNMENT ACCOUNTABILITY IRI ALSO ENCOURAGED INCREASED ELECTORAL PARTICIPATION BY WORKING WITH INDEPENDENT CANDIDATES AND ISSUE-BASED COALITIONS AS THEY DEVELOP CAMPAIGNS THAT ADDRESS CITIZENS’ CONCERNS

4c

(Code) (Expenses \$ 2,261,971 including grants of \$) (Revenue \$)

JORDAN (USAID Z-278-A-00-10-00-407-00-8182)THE INTERNATIONAL REPUBLICAN INSTITUTE’S (IRI) PROGRAM IN JORDAN HAS FOCUSED ON CONNECTING CITIZENS AND GOVERNMENT BY PROMOTING DEMOCRATIC GOVERNANCE AND STRONG POLITICAL PARTIES IRI GRASSROOTS-FOCUSED ACTIVITIES ENCOURAGE DEMOCRATIC PARTICIPATION ON THE NATIONAL AND LOCAL LEVELS BY ENGAGING CIVIL SOCIETY, PARTICULARLY WOMEN AND YOUTH, AND PREPARING POLITICAL PARTIES AND CANDIDATES FOR ELECTIONS THROUGH ITS DEMOCRATIC GOVERNANCE PROGRAMS, IRI HELPS LOCAL CIVIL SOCIETY GROUPS CONNECT WITH THEIR ELECTED OFFICIALS, INVOLVING THEM IN DECISION-MAKING PROCESSES AND ENCOURAGING GOVERNMENT BODIES TO BE MORE RESPONSIVE AND ACCOUNTABLE TO CONSTITUENCIES PROGRAM ACTIVITIES INCLUDE CIVIL SOCIETY ADVOCACY WORKSHOPS, CITIZEN SPONSORED ISSUE FORUMS, MAYORS’ ROUNDTABLE DISCUSSIONS, AND WORKSHOPS FOR MAYORS AND THEIR STAFF ON CONSTITUENT RELATIONS AND COMMUNICATIONS IRI ALSO OFFERS WORKSHOPS TO POLITICAL PARTIES AND CANDIDATES TO STRENGTHEN THEIR SKILLS AND PREPARE THEM FOR ELECTIONS IRI WORKSHOPS HELP PARTIES AND CANDIDATES DEVELOP MORE EFFECTIVE PLATFORMS, CAMPAIGNS, POLITICAL MESSAGES AND INTERNAL COMMUNICATIONS PLANS IRI’S WORK IS INFORMED AND SUPPORTED BY REGULAR PUBLIC OPINION RESEARCH AT THE NATIONAL AND MUNICIPAL LEVEL, WHICH FOCUSES GOVERNMENT OFFICIALS, KEY DECISION-MAKERS AND POLITICAL PARTIES ON THE ISSUES THAT MATTER MOST TO THE JORDANIAN PUBLIC

(Code) (Expenses \$ 41,620,890 including grants of \$ 3,638,803) (Revenue \$)

OTHER PROGRAM SERVICES IRI HAS PROJECTS ONGOING THROUGHOUT THE WORLD OTHER SIGNIFICANT PROGRAM SERVICES INCLUDE WORK IN NIGERIA, AND SUDAN

4d






















Other program services (Describe in Schedule O)

(Expenses \$ 41,620,890 including grants of \$ 3,638,803) (Revenue \$)

4e

Total program service expenses ▶ 53,963,195

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	69	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	241	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	AF, BO, BL, BK, CB, CO, TT, EG, GG, GT, ID, IZ, JO, KE, KS, KG, MX, MD, MG, NU, NI, RI, PK, PE, RS, LO, SO, SU, TH, TS, TU, UP, OC, CH, OD, ZI If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK, AL, AR, CA, CO, CT, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, DC, HI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	SONYA VEKSTEIN COO 1225 EYE STREET NW SUITE 700 WASHINGTON, DC (202) 408-9450

Check if Schedule O contains a response to any question in this Part VII ☐

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2012)

Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 44

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual.*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
GLOBAL HORIZONS LTD PO BOX 24598-00602NAIROBIKE	SECURE OFFICE SPACE AND LODGING	1,041,463
ARDAN ENERGY SERVICES PO BOX 262286DUBAIAE	SECURITY	909,976
PILGRIMS GROUP LIMITED LINKS BUSINESS CENTRE OLD WOKING RWOKINGSURRYUK	SECURITY	679,685
LAPIS LIMITED WAZIR AKBAR KHANKABULAF	PUBLIC OPINION RESEARCH	551,294
STEPTOE AND JOHNSON LLP 1330 CONNECTICUT AVENUE NW WASHINGTON DC 20036	LEGAL	534,589

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶24

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c	18,523		
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	60,996,200		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,366,327		
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f		63,381,050		
Program Service Revenue	2a		Business Code			
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1,244		
4		Income from investment of tax-exempt bond proceeds . .				
5		Royalties				
6a		Gross rents	(i) Real	(ii) Personal		
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b		Less cost or other basis and sales expenses				
c		Gain or (loss)				
d		Net gain or (loss)				
8a		Gross income from fundraising events (not including \$ 18,523 of contributions reported on line 1c) See Part IV, line 18	a	191		
b		Less direct expenses	b	17,941		
c		Net income or (loss) from fundraising events . .		-17,750		-17,750
9a		Gross income from gaming activities See Part IV, line 19	a			
b		Less direct expenses	b			
c		Net income or (loss) from gaming activities . .				
10a		Gross sales of inventory, less returns and allowances .	a			
b		Less cost of goods sold	b			
c		Net income or (loss) from sales of inventory . .				
	Miscellaneous Revenue	Business Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See Instructions		63,364,544	0	0	-16,506

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX ☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	3,638,803	3,638,803		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	1,348,698	952,432	396,266	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	11,238,937	7,749,408	3,489,529	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	1,174,874	816,395	358,479	
9	Other employee benefits.	3,061,724	2,099,088	962,636	
10	Payroll taxes.	1,064,809	739,913	324,896	
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	395,140	201,906	193,234	
c	Accounting.	200,119	63,950	136,169	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	1,500			1,500
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	9,463,926	9,384,785	79,141	
12	Advertising and promotion.	31,459	26,868	4,591	
13	Office expenses.	2,235,358	2,010,689	224,669	
14	Information technology.	664,140	302,220	361,920	
15	Royalties.				
16	Occupancy.	5,846,296	3,780,226	2,066,070	
17	Travel.	10,874,011	10,489,710	384,301	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	2,809,768	2,755,278	54,490	
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	144,640		144,640	
23	Insurance.	419,754	63,934	355,820	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.):				
a	FIELD OFFICE	4,760,363	4,625,397	134,966	
b	POLLING	2,013,814	2,013,814		
c	SECURITY SERVICES	1,056,063	1,034,157	21,906	
d	EQUIPMENT RENTAL/MAINT	714,783	546,474	168,309	
e	All other expenses	860,578	667,748	192,830	
25	Total functional expenses. Add lines 1 through 24e.	64,019,557	53,963,195	10,054,862	1,500
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X ☐

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			4,600	1	4,580
	2	Savings and temporary cash investments			4,578,654	2	4,353,375
	3	Pledges and grants receivable, net			2,563,491	3	2,686,744
	4	Accounts receivable, net			1,495,799	4	780,928
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			712,607	9	1,100,354
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,059,344			
	b	Less: accumulated depreciation	10b	1,754,798	356,066	10c	304,546
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			351,911	15	431,743
	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,063,128	16	9,662,270
Liabilities	17	Accounts payable and accrued expenses			3,882,352	17	4,463,286
	18	Grants payable			1,776,733	18	1,544,648
	19	Deferred revenue			1,309,956	19	996,281
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			556,877	25	523,535
	26	Total liabilities. Add lines 17 through 25			7,525,918	26	7,527,750
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			2,398,590	27	1,979,121
	28	Temporarily restricted net assets			138,620	28	155,399
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			2,537,210	33	2,134,520
	34	Total liabilities and net assets/fund balances			10,063,128	34	9,662,270

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	63,364,544
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,019,557
3	Revenue less expenses Subtract line 2 from line 1	3	-655,013
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,537,210
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	252,323
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,134,520

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:

Software Version:

EIN: 52-1340267

Name: INTERNATIONAL REPUBLICAN INSTITUTE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SENATOR JOHN MCCAIN CHAIRMAN	1 00	X						0	0	0
RICHARD S WILLIAMSON VICE CHAIRMAN	1 00	X						0	0	0
J WILLIAM MIDDENDORF CO-SECRETARY/TREASURER	1 00	X						0	0	0
ALEC L POTTEVINT II CO-SECRETARY/TREASURER	1 00	X						0	0	0
THOMAS M BARBA GENERAL COUNSEL	1 00	X						0	0	0
GAHL HODGES BURT DIRECTOR	1 00	X						0	0	0
REPRESENTATIVE DAVID DREIER DIRECTOR	1 00	X						0	0	0
FRANK J FAHRENKOPF JR DIRECTOR	1 00	X						0	0	0
ALISON B FORTIER DIRECTOR	1 00	X						0	0	0
REPRESENTATIVE KAY GRANGER DIRECTOR	1 00	X						0	0	0
CHERYL F HALPERN DIRECTOR	1 00	X						0	0	0
AL HOFFMAN DIRECTOR	1 00	X						0	0	0
WILLIAM J HYBL DIRECTOR	1 00	X						0	0	0
SENATOR MARK KIRK DIRECTOR	1 00	X						0	0	0
JIM KOLBE DIRECTOR	1 00	X						0	0	0
MICHAEL KOSTIW DIRECTOR	1 00	X						0	0	0
TAMI LONGABERGER DIRECTOR	1 00	X						0	0	0
PETER T MADIGAN DIRECTOR	1 00	X						0	0	0
JANET MULLINS GRISSOM DIRECTOR	1 00	X						0	0	0
CONSTANCE BERRY NEWMAN DIRECTOR	1 00	X						0	0	0
JOHN FW ROGERS DIRECTOR	1 00	X						0	0	0
RANDY SCHEUNEMANN DIRECTOR	1 00	X						0	0	0
JOSEPH R SCHMUCKLER DIRECTOR	1 00	X						0	0	0
BRENT SCOWCROFT DIRECTOR	1 00	X						0	0	0
MARGARET TUTWILER DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
OLIN L WETHINGTON DIRECTOR	1 00	X						0	0	0
LORNE W CRANER PRESIDENT	40 00			X				204,233	0	61,129
JUDY VAN REST EXECUTIVE VICE PRESIDENT	40 00			X				169,609	0	45,434
THOMAS E GARRETT VICE PRESIDENT FOR PROGRAM	40 00			X				137,655	0	41,878
DANIEL W FISK VICE PRESIDENT FOR POLICY	40 00			X				135,667	0	22,747
SONYA VEKSTEIN CHIEF OPERATIONS OFFICER	40 00			X				157,299	0	52,636
SABINA AGARUNOVA CHIEF FINANCIAL OFFICER	40 00			X				111,958	0	21,082
JOHANNA KAO RESIDENT COUNTRY DIRECTOR	40 00					X		180,199	0	43,729
HANS HOLZEN RESIDENT COUNTRY DIRECTOR	40 00					X		134,492	0	20,725
JAN SUROTCHAK RESIDENT COUNTRY DIRECTOR	40 00					X		136,013	0	31,408
GRETCHEN BIRKLE RESIDENT COUNTRY DIRECTOR	40 00					X		138,262	0	21,402
STEPHEN CIMA REGIONAL PROGRAM DIRECTOR	40 00					X		139,282	0	0

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization INTERNATIONAL REPUBLICAN INSTITUTE	Employer identification number 52-1340267
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	96,131,650	85,478,428	75,493,223	66,210,857	63,381,050	386,695,208
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	96,131,650	85,478,428	75,493,223	66,210,857	63,381,050	386,695,208
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						386,695,208

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	96,131,650	85,478,428	75,493,223	66,210,857	63,381,050	386,695,208
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,979	920	1,331	1,114	1,244	10,588
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						386,705,796
12 Gross receipts from related activities, etc (see instructions)					12	27,510
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	100 000 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	99 980 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶✔	
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶✔	
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶✔	
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶✔	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶✔	

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization INTERNATIONAL REPUBLICAN INSTITUTE	Employer identification number 52-1340267
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2012

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

1b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
1b Contributions					
1c Net investment earnings, gains, and losses					
1d Grants or scholarships					
1e Other expenditures for facilities and programs					
1f Administrative expenses					
1g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
1b Buildings				
1c Leasehold improvements		632,058	494,671	137,387
1d Equipment		1,093,885	1,016,440	77,445
1e Other		333,401	243,687	89,714
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				304,546

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	63,918,218
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	535,733
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	17,941
e	Add lines 2a through 2d	2e	553,674
3	Subtract line 2e from line 1	3	63,364,544
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	0
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	63,364,544

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	64,320,908
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities	2a	535,733
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	17,941
e	Add lines 2a through 2d	2e	553,674
3	Subtract line 2e from line 1	3	63,767,234
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	252,323
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	64,019,557

Part XIII

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	IRI IS GENERALLY EXEMPT FROM FEDERAL INCOME TAX UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, IRI QUALIFIES FOR THE CHARITABLE CONTRIBUTIONS DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. IRI HAD NO NET UNRELATED BUSINESS INCOME FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012. IRI FOLLOWS THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, IRI MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED IRI'S TAX POSITIONS AND CONCLUDED THAT IRI HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY, IRI IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2010.
PART XI, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES REPORTED ON LINE 8B 17,941
PART XII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES REPORTED ON LINE 8B 17,941
PART XII, LINE 4B - OTHER ADJUSTMENTS		REVERSAL OF GRANT EXPENSES 252,323

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total	20	89			18,149,517
b Total from continuation sheets to Part I	17	132			21,505,252
c Totals (add lines 3a and 3b)	37	221			39,654,769

Part II

1

24

0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☒ Yes

☐ No

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 52-1340267
Name: INTERNATIONAL REPUBLICAN INSTITUTE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	1	10	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	708,793
CENTRAL AMERICA AND THE CARIBBEAN			GRANTMAKING		131,139
EAST ASIA AND THE PACIFIC	9	41	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	5,140,256

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC			GRANTMAKING		1,007,960
EUROPE (INCLUDING ICELAND & GREENLAND)	4	15	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	2,235,469
MIDDLE EAST AND NORTH AFRICA	5	20	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	7,880,868

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA			GRANTMAKING		731,900
NORTH AMERICA	1	3	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	313,132
RUSSIA & THE NEWLY INDEPENDENT STATES	7	31	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	3,283,019

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
RUSSIA & THE NEWLY INDEPENDENT STATES			GRANTMAKING		224,607
SOUTH AMERICA	1	3	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	2,689,584
SOUTH ASIA	2	37	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	3,267,422

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SOUTH ASIA			GRANTMAKING		649,416
SUB-SAHARAN AFRICA	7	61	PROGRAM SERVICES	DEMOCRACY ASSISTANCE	10,497,423
SUB-SAHARAN AFRICA			GRANTMAKING		893,781

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	ENCOURAGE A CIVIL PUBLIC DEBATES OF ISSUES IN MEDIA	131,139	BANK WIRE			
		EAST ASIA AND THE PACIFIC	ANTI-HUMAN TRAFFICKING ADVOCACY	8,500	BANK WIRE			
		EAST ASIA AND THE PACIFIC	INCREASE THE CAPACITY OF GRASSROOTS ORGANIZATIONS	45,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC	ENCOURAGE PARTICIPATION IN ELECTIONS	10,994	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	SUPPORT COMMUNITY PARTICIPATION TO BUILD SUSTAINABLE REGIONAL DEVELOPMENT	8,500	BANK WIRE			
		EAST ASIA AND THE PACIFIC	SUPPORT LOCAL INITIATIVES TO CREATE MORE CARING AND ACCEPTING COMMUNITIES FOR CHILDREN AND WOMEN LIVING WITH HIV	8,500	BANK WIRE			
		EAST ASIA AND THE PACIFIC	INCREASE THE KNOWLEDGE AND CAPACITY OF ORGANIZATIONS ASSISTING MIGRANT WORKERS	50,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC	INCREASE KNOWLEDGE RELATED TO LAND AND NATURAL RESOURCE LEGAL RIGHTS	8,500	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	CREATE A DEMOCRACY LECTURER PROGRAM	17,149	BANK WIRE			
		EAST ASIA AND THE PACIFIC	ENHANCE DEMOCRATIC GOVERNANCE, POLITICAL PARTICIPATION AND POLICY REFORM	50,000	BANK WIRE			
		EAST ASIA AND THE PACIFIC	PROMOTE EFFECTIVE GRASSROOTS CIVIL SOCIETY AND GOVERNANCE	137,140	BANK WIRE			
		EAST ASIA AND THE PACIFIC	PROMOTE EFFECTIVE GRASSROOTS CIVIL SOCIETY AND GOVERNANCE	150,000	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	COLLEGE STUDENT EXCHANGE WORKSHOP	11,797	BANK WIRE			
		EAST ASIA AND THE PACIFIC	YOUTH POLITICAL PARTICIPATION	501,880	BANK WIRE			
		MIDDLE EAST AND NORTH AFRICA	STRENGTHEN CIVIL SOCIETY AND TO SUPPORT CIVIC INITIATIVES	731,900	BANK WIRE			
		RUSSIA & THE NEWLY INDEPENDENT STATES	SUPPORTING INDEPENDENT VOICES OF REFORM IN AT-RISK COMMUNITIES	164,040	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA & THE NEWLY INDEPENDENT STATES	INCREASE POLITICAL PARTICIPATION OF YOUTH	49,214	BANK WIRE			
		RUSSIA & THE NEWLY INDEPENDENT STATES	FOSTER POLITICAL ENGAGEMENT AND DIALOGUE FOR A MORE DEMOCRATIC SOCIETY	11,353	BANK WIRE			
		SOUTH ASIA	SUPPORT THE DEVELOPMENT OF POLITICAL PARTIES	516,598	BANK WIRE			
		SOUTH ASIA	SUPPORT THE DEVELOPMENT OF CIVIL SOCIETY	132,818	BANK WIRE			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SUPPORT THE DEVELOPMENT OF POLITICAL PARTIES	131,222	BANK WIRE			
		SUB-SAHARAN AFRICA	INCREASE POLITICAL PARTICIPATION	590,250	BANK WIRE			
		SUB-SAHARAN AFRICA	ELECTION OBSERVATION AND ASSESSMENT	102,310	BANK WIRE			
		SUB-SAHARAN AFRICA	PROMOTE A FREE AND OPEN SOCIETY BASED ON RULE OF LAW AND GOVERNANCE	69,999	BANK WIRE			

Form 990 Schedule F - Supplemental Information

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 IRI EVALUATES FINANCIAL RISK AND PERFORMS MANAGEMENT ASSESSMENT OF GRANTEE S MONITORING IS ESTABLISHED BASED ON RISK FACTORS GRANTEE S SUBMIT NARRATIVE AND FINANCIAL REPORTS ACCORDING TO ESTABLISHED SCHEDULE PERFORMANCE IS EVALUATED AND MONITORED REGULARLY PROGRAM STAFF PERFORMS ON-SITE VISITS TO EVALUATE PROGRAM ACTIVITIES FIELD OFFICES REPORT FINANCIAL TRANSACTIONS ON A MONTHLY BASIS FINANACIAL OVERSIGHT IS PROVIDED BY A REGIONAL ACCOUNTANT IN THE FIELD AND HQ ACCOUNTING DEPARTMENT IN DC PROGRAM AND FINANCIAL STAFF VISIT FIELD OFFICE ON A REGULAR BASIS

Form 990 Schedule F - Supplemental Information

Identifier	ReturnReference	Explanation
		SCHEDULE F, PART IV, LINE 6 THE ORGANIZATION HAS FILED FORM 5713 UNDER SEPARATE COVER TO THE IRS THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 990-T

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		JEANE J. KIRKPATRICK AWARD LUNCHEON (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	18,714		18,714
	2	Less Contributions . . .	18,523		18,523
	3	Gross income (line 1 minus line 2)	191		191
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs . . .			
	7	Food and beverages .	12,198		12,198
	8	Entertainment			
	9	Other direct expenses .	5,743		5,743
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine line 3, column (d), and line 10 ▶			
					(17,941)
					-17,750

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in



a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No


b If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____

c If "Yes," enter name and address of the third party

Name 

Address 

16 Gaming manager information

Name 


Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
SPECIAL EVENT DETAIL	SCHEDULE G, PART II	EVENT #1 THE JEAN J KIRKPATRICK AWARD RECOGNIZES WOMEN WHO MAKE OUTSTANDING CONTRIBUTIONS TO WOMEN IN POLITICS AND CIVIL SOCIETY IRI'S WOMEN'S DEMOCRACY NETWORK PRESENTED THIS AWARD ON MARCH 7, 2013

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a		No
		4b		No
		4c		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III	5a		No
		5b		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III	6a		No
		6b		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LORNE W CRANER PRESIDENT	(i)	203,543	0	690	38,000	23,129	265,362	0
	(ii)	0	0	0	0	0	0	0
(2) JUDY VAN REST EXECUTIVE VICE PRESIDENT	(i)	165,799	0	3,810	34,000	11,434	215,043	0
	(ii)	0	0	0	0	0	0	0
(3) THOMAS E GARRETT VICE PRESIDENT FOR PROGRAM	(i)	136,965	0	690	31,000	10,878	179,533	0
	(ii)	0	0	0	0	0	0	0
(4) DANIEL W FISK VICE PRESIDENT FOR POLICY	(i)	134,377	0	1,290	14,000	8,747	158,414	0
	(ii)	0	0	0	0	0	0	0
(5) SONYA VEKSTEIN CHIEF OPERATIONS OFFICER	(i)	156,609	0	690	33,000	19,636	209,935	0
	(ii)	0	0	0	0	0	0	0
(6) JOHANNA KAO RESIDENT COUNTRY DIRECTOR	(i)	94,778	0	85,421	9,866	33,863	223,928	0
	(ii)	0	0	0	0	0	0	0
(7) HANS HOLZEN RESIDENT COUNTRY DIRECTOR	(i)	95,502	0	38,990	375	20,350	155,217	0
	(ii)	0	0	0	0	0	0	0
(8) JAN SUROTCZAK RESIDENT COUNTRY DIRECTOR	(i)	110,986	0	25,027	11,402	20,006	167,421	0
	(ii)	0	0	0	0	0	0	0
(9) GRETCHEN BIRKLE RESIDENT COUNTRY DIRECTOR	(i)	125,190	12,622	450	13,885	7,517	159,664	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	SOME RESIDENT COUNTRY DIRECTORS RECEIVED HOUSING ALLOWANCE, WHICH IS TAXABLE

Software ID:
Software Version:
EIN: 52-1340267
Name: INTERNATIONAL REPUBLICAN INSTITUTE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
LORNE W CRANER	(i) (ii)	203,543 0	0 0	690 0	38,000 0	23,129 0	265,362 0	0 0
JUDY VAN REST	(i) (ii)	165,799 0	0 0	3,810 0	34,000 0	11,434 0	215,043 0	0 0
THOMAS E GARRETT	(i) (ii)	136,965 0	0 0	690 0	31,000 0	10,878 0	179,533 0	0 0
DANIEL W FISK	(i) (ii)	134,377 0	0 0	1,290 0	14,000 0	8,747 0	158,414 0	0 0
SONYA VEKSTEIN	(i) (ii)	156,609 0	0 0	690 0	33,000 0	19,636 0	209,935 0	0 0
JOHANNA KAO	(i) (ii)	94,778 0	0 0	85,421 0	9,866 0	33,863 0	223,928 0	0 0
HANS HOLZEN	(i) (ii)	95,502 0	0 0	38,990 0	375 0	20,350 0	155,217 0	0 0
JAN SUROTCHAK	(i) (ii)	110,986 0	0 0	25,027 0	11,402 0	20,006 0	167,421 0	0 0
GRETCHEN BIRKLE	(i) (ii)	125,190 0	12,622 0	450 0	13,885 0	7,517 0	159,664 0	0 0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
INTERNATIONAL REPUBLICAN INSTITUTE

Employer identification number
52-1340267

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	
	FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES ARE TO MAINTAIN A HIGH STANDARD OF ETHICAL BUSINESS PRACTICES IN ALL INSTITUTE OPERATIONS ACTIVITIES, ACTIONS, OR BUSINESS INTERESTS THAT JEOPARDIZE OR OVERLAP THE INTERESTS OF THE INSTITUTE ARE A BASIS FOR CONFLICT AND ARE PROHIBITED TO AVOID ANY POTENTIAL CONFLICTS OF INTEREST, EMPLOYEES ARE PROHIBITED FROM ENGAGING IN ANY OUTSIDE ACTIVITIES OR EMPLOYMENT THAT MAY MATERIALLY INTERFERE WITH THE EFFECTIVE PERFORMANCE OF INSTITUTE RESPONSIBILITIES OR WHICH CLEARLY ARE NOT COMPATIBLE WITH THE INSTITUTE'S BEST INTERESTS THE PRESIDENT SHOULD BE NOTIFIED IMMEDIATELY OF ANY POTENTIAL CONFLICTS OF INTEREST IRI DOES NOT PROHIBIT THE HIRING OF INDIVIDUALS RELATED TO EXISTING IRI STAFF HOWEVER, SUCH INDIVIDUALS CANNOT BE CONSIDERED FOR POSITIONS WHERE THE HIRING DECISION WOULD BE MADE BY A RELATIVE IN ADDITION, RELATIVES MAY NOT WORK IN POSITIONS THAT WOULD ENTAIL A SUPERVISOR/SUBORDINATE RELATIONSHIP
	FORM 990, PART VI, SECTION B, LINE 15	THE CHAIR OF THE COMPENSATION COMMITTEE OF IRI'S BOARD REVIEWED THE COMPARABILITY OF DATA FOR THE COMPENSATION LEVELS OF IRI'S PRESIDENT AND ALL OTHER OFFICERS, INTERVIEWED ALL OFFICERS AND PRESENTED HIS FINDINGS TO THE FULL BOARD FOR DISCUSSION AND APPROVAL
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST
OTHER FEES	FORM 990, PART IX, LINE 11G	OTHER FEES PROGRAM SERVICE EXPENSES 9,384,785 MANAGEMENT AND GENERAL EXPENSES 79,141 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 9,463,926
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	REVERSE OF GRANT EXP 252,323
	FORM 990, PART XII, LINE 2C	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS
THE NUMBER OF VOLUNTEERS	FORM 990, PART I, LINE 6	NUMBER OF VOLUNTEERS IS BASED ON IN-KIND CONTRIBUTIONS RECOGNIZED FOR FISCAL YEAR 2013